

**CANNABIS TAX CASH PAYMENT VERIFICATION**

**DATE OF PAYMENT:** \_\_\_\_\_

**PAYMENT TYPE:**                      BUSINESS TAX                      PERMIT                      INVOICE

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**ACCOUNT/PERMIT/INVOICE NO:** \_\_\_\_\_

**BUSINESS NAME:** \_\_\_\_\_

**BUSINESS CONTACT NAME:** \_\_\_\_\_

**BUSINESS CONTACT PHONE:** \_\_\_\_\_

**TOTAL AMOUNT DELIVERED:** \_\_\_\_\_



DENOMINATION	COUNT	AMOUNT
\$100		
\$50		
\$20		
\$10		
\$5		
\$2		
\$1		
Quarters		
Dimes		
Nickels		
Pennies		
<b>TOTAL</b>		\$

Please sign to verify the amount counted